Address, City, Zip Code

Linda McCulloch, Superintendent INDIVIDUAL TRANSPORTATION CONTRACT

Contract #

PO B	ox 202501 na, MT 59620				School Year 2004- 2 ie to School Clerk J		
Elementary District Res			: Contract		County		Legal Entity
							15.00
High School or K-12 Di	•	ble for Reimbu	irsing the Conf	ract	County		Legal Entity
Philipsburg K-12			11.1	10	Granite	9	0416
Is this contract share ☐ yes ☐ no		•	J	ol?			
Are you applying for (If yes, please attack ISOLATION: Section 2)	h explanation)	□ No	mbursement	Student Name	School	Grade
rates for special circum increased rates, individ trustees of the district, Public Instruction. (10.7)	nstances of isola lual circumstand the county trans	ation of resider ces must be re sportation com	nce. In order to eviewed and apainmittee, and the	o receive oproved by the	Student Name	School	Grade
Check here only if incre District Trustees and th	eased payment	due to isolatio	n has been ap	proved by the	Student Name	School	Grade
Elem District Approval HS District Approval		In □ no	itials		Student Name	School	Grade
County Approval	□ yes	□ no			THIS CONTRA Grades 1-12	ACT IS FOR:	
Parent or Guardian	Name: (Pleas	e Print)			☐ 1st Semeste	er Only	ster Only Both Semesters
Dave M. Faust Physical Address (st	treet address	only):				en/Kindergarten er Only □ 2nd Semes	ster Only Both Semesters
Distance from home	to nearest so	chool (one w	av)		KINDERGART	FEN/PREKINDERGARTE child rides with other s	•
Elementary 0	HS 17.5	71001 (0110 W	<i></i>		To or from Bus	s Stop times pe	er day, days per week
Distance from home Elementary 0	to nearest bu HS 11.5	us stop, if an	y (one way)		Kindergarten To or from Bus	child rides <u>without</u> others Stop times pe	er day, days per week er school-age students: er day, days per week
☐ Contract is for or	ne-way only				To or from Sch	1001 times pe	er day, days per week
Students in Each Grade Le	evel - Only include	the students to I	be covered by th	is contract.	Deadlines:	ue to School Clerk June	1
	Pre-K Total	K Total	1-8 Total	9-12 Total	CLERKS: Ser		t by July 1, retain a copy for your
Regular Trans					files.	PERINTENDENTS: Send	I original to OPI by July 10, retain a
Spec. Ed. Trans					copy for your fi		- Tonginar to or roy bary ro, rotain a
Room & Board						REIMBURSEME (For district, county ar	
Correspondence Reg.							
Contingency Spec. Ed. Contin.						Reimbursement rate is 20-10-142,	
Agreement between	parent (pare	nt name)			, and school dis	strict (district name)	
(county name)				County hereinat	ter referred to as the I	District(s)	
The parties agree as follow		transportation fo		3 ,		()	nt or guardian assures that a licensed and
In March and June,	the District shall					on the contract actually occurs. teacher or principal of the school	of the number of days the student(s) was
	be computed on the				142, MCA, and the information er enrolled in school, whichev	n accompanying this contract.	
Elementary School I			ard of Truste		or canonica in school, whichev	or occurs ilist.	Date
High School District Philipsburg K-12 Sc		Chair, Boa	ard of Truste	es			Date
			I attes	t that the above	information is true and	d correct.	<u> </u>
Signature - Parent or	Guardian					Date	

Address, City, Zip Code

INDIVIDUAL TRANSPORTATION CONTRACT

Contract #

	Box 202501 na, MT 59620	0-2501			e to School Clerk June 1		
Elementary District Re	sponsible for R	eimbursing the	Contract		County	<u> </u>	Legal Entity
High School or K-12 D	istrict Responsi	ble for Reimbu	rsing the Con	tract	County		Legal Entity
Philipsburg K-12	2 Schools				Granite		0416
Is this contract shar ☐ yes ☐ no	ed between e	lementary ar	nd high scho	ol?			
Are you applying for	r isolation stat	tus? □ Yes	□ No		Student Name	School	Grade
(If yes, please attac ISOLATION: Section	20-10-142, MC	A, provides for			Student Name	361001	Clade
rates for special circun increased rates, individe trustees of the district, Public Instruction. (10.	dual circumstan the county tran	ces must be re sportation com	viewed and apmittee, and th	oproved by the	Student Name	School	Grade
Check here only if incr District Trustees and the		sportation Con	nmittee.	proved by the	Student Name	School	Grade
Elem District Approval HS District Approval		□ no	itials		Student Name	School	Grade
County Approval	□ yes	□ no			THIS CONTRACT IS F	OR:	
Parent or Guardian	Name: (Pleas	se Print)			☐ 1st Semester Only	□ 2nd Semester Onl	y Both Semesters
Heidi A. Hinkle Physical Address (s	treet address	only).			Pre-kindergarten/Kinde	ergarten 2nd Semester Onl	Doth Competers
ye.ea. / .aa. eee (e		oy).			KINDERGARTEN/PRE		y Both Semesters
Distance from home Elementary 0 Distance from home Elementary 0 Contract is for o Students in Each Grade Lo	HS 17 e to nearest be HS 3.5 ne-way only	us stop, if an	y (one way)	is contract. 9-12 Total	by this contract: To or from Bus Stop_ To or from School Kindergarten child ric To or from Bus Stop_ To or from School Deadlines: PARENTS: Due to Sc CLERKS: Send origin	times per day,times per day,tes without other schotimes per day,times per day,times per day,thool Clerk June 1.	days per week days per week days per week col-age students: days per week days per week days per week days per week
Regular Trans					files.		
Spec. Ed. Trans					copy for your files.	NDENIS: Send origina	al to OPI by July 10, retain a
Room & Board						EIMBURSEMENT R	
Correspondence					(For dis	strict, county and OPI	use only)
Reg. Contingency					Reim	bursement rate is deterr	mined by
Spec. Ed. Contin.						20-10-142, MCA.	
Agreement betweer	n parent (pare	nt name)			, and school district (dis	strict name)	, , , , , , , , , , , , , , , , , , , ,
insured driver will t 2. In March and June transported for the 3. The payment shall	ansport or provide ransport the stude , the District shall past semester. be computed on t	ents. Mileage cor pay the parent th the basis of the so	r the student(s) to htracts are valid of e sum officially a	o and from the school only when transportation approved in the applicated in Section 20-10-1	ter referred to as the District(s or bus stop on the days when school is on for the distance reported on the contu- tion upon certification by the teacher or 42, MCA, and the information accompa er enrolled in school, whichever occurs for	in session. The parent or guard actually occurs. principal of the school of the nunying this contract.	
Elementary School	District		ard of Truste				Date
High School District Philipsburg K-12 Sc		Chair, Boa	ard of Truste	es			Date
,	·	<u> </u>	I attes	t that the above	information is true and correct		
Signature - Parent or	Guardian					Date	

Address, City, Zip Code

INDIVIDUAL TRANSPORTATION CONTRACT

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Co	nt	ro	^ +	-

PO B	Box 202501 na, MT 59620				School Year 2004- 2005 ue to School Clerk June 1		
Elementary District Re	sponsible for Re	eimbursing the	Contract		County	<u> </u>	Legal Entity
High School or K-12 D	istrict Responsi	ole for Reimbu	rsing the Con	tract	County		Legal Entity
Philipsburg K-12	2 Schools				Granite		0416
Is this contract share □ yes □ no	ed between e	ementary an	d high school	ol?			
Are you applying for (If yes, please attac	h explanation)	□ No		Student Name	School	Grade
ISOLATION: Section rates for special circum increased rates, indivic trustees of the district, Public Instruction. (10.)	nstances of isola dual circumstand the county trans	ation of resider ces must be re sportation com	nce. In order to viewed and appropriate the mittee, and the	o receive oproved by the	Student Name	School	Grade
Check here only if incredistrict Trustees and the	eased payment	due to isolation	n has been ap	proved by the	Student Name	School	Grade
Elem District Approval	□ yes	lni □ no	itials		Student Name	School	Grade
HS District Approval County Approval	•	□ no □ no			THIS CONTRACT IS FO	OR:	
Parent or Guardian	Name: (Pleas	e Print)			Grades 1-12 □ 1st Semester Only	□ 2nd Semester Only	/ □ Both Semesters
Nancy Sturdeva Physical Address (s		only):			Pre-kindergarten/Kinder		/ □ Both Semesters
,		- 37			KINDERGARTEN/PRE	·	both Semesters
Distance from home Elementary 0 Distance from home Elementary 0	HS 18.5	`			Kindergarten child rid by this contract: To or from Bus Stop To or from School Kindergarten child rid To or from Bus Stop	times per day,times per day,times per day,times per day,times per day,times per day,times per day,	days per week days per week days per week ol-age students: days per week
□ Contract is for o	ne-way only					times per day, _	days per week
Students in Each Grade Le	evel - Only include	the students to b	e covered by the	is contract.	<u>Deadlines:</u> PARENTS: Due to Sch	ool Clerk June 1.	
	Pre-K Total	K Total	1-8 Total	9-12 Total	CLERKS: Send origina files.	I to County Supt by July	/ 1, retain a copy for your
Regular Trans						NDENTS: Send origina	I to OPI by July 10, retain a
Spec. Ed. Trans					copy for your files.		
Room & Board						EIMBURSEMENT RA trict, county and OPI	
Correspondence Reg.							
Contingency Spec. Ed. Contin.					Reimb	ursement rate is determ 20-10-142, MCA.	lined by
Agreement betweer	n parent (pare	nt name)			, and school district (dist	rict name)	,
insured driver will t 2. In March and June transported for the 3. The payment shall	ansport or provide ransport the stude , the District shall p past semester. be computed on the	nts. Mileage con pay the parent the	r the student(s) to stracts are valid of e sum officially a chedule establish	o and from the schoo only when transportal approved in the applicated in Section 20-10-	of the referred to as the District(s) of or bus stop on the days when school is in the distance reported on the contraction upon certification by the teacher or part of the distance reported on the contraction upon certification by the teacher or part of the distance of	n session. The parent or guard ct actually occurs. vincipal of the school of the nur ying this contract.	
Elementary School		,	ard of Truste				Date
High School District Philipsburg K-12 Sc		Chair, Boa	ard of Truste	es			Date
			l attes	t that the above	information is true and correct.		
Signature - Parent or	Guardian	<u> </u>				Date	

Address, City, Zip Code

INDIVIDUAL TRANSPORTATION CONTRACT

Contract #

	Box 202501 na, MT 59620	0-2501			chool Year 2004- 2005 e to School Clerk June 1		
Elementary District Re			Contract		County		Legal Entity
High School or K-12 D	District Responsi	ble for Reimbur	sing the Cont	tract	County		Legal Entity
Philipsburg K-1	2 Schools				Granite		0416
Is this contract shar ☐ yes ☐ no	red between e	lementary and	d high scho	ol?			
Are you applying fo (If yes, please attaction) ISOLATION: Section	h explanation)	□ No	mburgament	Student Name	School	Grade
rates for special circur increased rates, indivi- trustees of the district, Public Instruction. (10.	nstances of isola dual circumstand the county trans	ation of residen ces must be rev sportation comi	ce. In order t viewed and ap mittee, and th	o receive oproved by the	Student Name	School	Grade
Check here only if incomplistrict Trustees and t		sportation Com	mittee.	proved by the	Student Name	School	Grade
Elem District Approval		□ no	tials		Student Name	School	Grade
HS District Approval County Approval		□ no □ no			THIS CONTRACT IS	FOR:	
Parent or Guardian	Name: (Pleas	e Print)			Grades 1-12 ☐ 1st Semester Only	□ 2nd Semester Onl	y Both Semesters
Susan J. Abbot Physical Address (s		only):			Pre-kindergarten/Kind ☐ 1st Semester Only	ergarten 2nd Semester Onl	y □ Both Semesters
Distance from home Elementary 0 Distance from home Elementary 0 Contract is for o Students in Each Grade L Regular Trans Spec. Ed. Trans Room & Board Correspondence Reg. Contingency Spec. Ed. Contin.	HS 16 e to nearest but HS 2.5 ene-way only evel - Only include Pre-K Total	the students to b	(one way)	is contract. 9-12 Total	by this contract: To or from Bus Stop_ To or from School	times per day, times per day, times per day, times per day, des without other schotimes per day, times per day, times per day, times per day, chool Clerk June 1.	days per week da
insured driver will In March and June transported for the The payment shall This contract shall	ws: ansport or provide transport the stude , the District shall p past semester. I be computed on to	transportation for nts. Mileage confo pay the parent the the basis of the sc and of the school y	the student(s) tracts are valid of sum officially a hedule establishear or when the	o and from the school only when transportatic ipproved in the applicated in Section 20-10-1- student(s) is no longe	, and school district (dister referred to as the District(stor bus stop on the days when school is no for the distance reported on the contion upon certification by the teacher of 42, MCA, and the information accompare renolled in school, whichever occurs	s). s in session. The parent or guard tract actually occurs. r principal of the school of the nu	mber of days the student(s) was
Elementary School		Chair, Boa	rd of Truste	es			Date
High School District Philipsburg K-12 Sc		Chair, Boa	rd of Truste	es			Date
			l attes	t that the above i	nformation is true and correc	t.	
Signature - Parent or	r Guardian					Date	

Address, City, Zip Code

INDIVIDUAL TRANSPORTATION CONTRACT

Contract #

PO B	Box 202501 na, MT 59620				School Year 2004- 2005 ue to School Clerk June 1		
Elementary District Re	sponsible for Re	eimbursing the	Contract		County	-	Legal Entity
High School or K-12 D	istrict Responsit	ole for Reimbu	rsing the Cont	tract	County		Legal Entity
Drummond H S					Granite		0420
Is this contract share □ yes □ no	ed between el	ementary an	d high school	ol?			
Are you applying for (If yes, please attact	h explanation)	1	□ No		Student Name	School	Grade
ISOLATION: Section rates for special circum increased rates, indivic trustees of the district, Public Instruction. (10.)	nstances of isola dual circumstand the county trans	ation of resider ces must be re sportation com	nce. In order to eviewed and appropriate the contract of the c	o receive oproved by the	Student Name	School	Grade
Check here only if incredistrict Trustees and the	eased payment	due to isolatio	n has been ap	pproved by the	Student Name	School	Grade
Elem District Approval	□ yes	Ini □ no	itials		Student Name	School	Grade
HS District Approval County Approval	•	□ no □ no			THIS CONTRACT IS FO	OR:	
Parent or Guardian	Name: (Pleas	e Print)			Grades 1-12 □ 1st Semester Only	□ 2nd Semester Only	/ □ Both Semesters
Jim Nash Physical Address (s	troot address	only):			Pre-kindergarten/Kinder		
Filysical Address (s	lieet address	Offiy).			□ 1st Semester Only KINDERGARTEN/PRE	·	√ □ Both Semesters
Distance from home Elementary 0 Distance from home Elementary 0 Contract is for or	HS 32.5 e to nearest bu	`	• /		Kindergarten child ride by this contract: To or from Bus Stop To or from School Kindergarten child ride To or from Bus Stop To or from School	times per day,times per day,times per day,times per day,times per day,times per day,times per day,	days per week days per week days per week ol-age students: days per week days per week days per week
Students in Each Grade Le	evel - Only include	the students to b	e covered by thi	is contract.	Deadlines: PARENTS: Due to Sch	ool Clerk June 1.	
	Pre-K Total	K Total	1-8 Total	9-12 Total	CLERKS: Send origina		/ 1, retain a copy for your
Regular Trans					files. COUNTY SUPERINTEI	NDENTS: Send origina	I to OPI by July 10, retain a
Spec. Ed. Trans					copy for your files.		
Room & Board Correspondence						EIMBURSEMENT RA trict, county and OPI	
Reg.					Doimh	ursement rate is determ	sinod by
Contingency Spec. Ed. Contin.					Reinib	20-10-142, MCA.	illied by
Agreement betweer	n parent (pare	nt name)			, and school district (dist	rict name)	,
insured driver will t 2. In March and June transported for the 3. The payment shall	ansport or provide to ransport the stude, the District shall p past semester. be computed on the	nts. Mileage con pay the parent the	r the student(s) to ntracts are valid of e sum officially a chedule establish	o and from the schoo only when transportat approved in the applic ned in Section 20-10-	Ifter referred to as the District(s) of or bus stop on the days when school is it ion for the distance reported on the contractation upon certification by the teacher or part of the contraction with the contraction accompanier enrolled in school, whichever occurs fire	n session. The parent or guard ct actually occurs. vincipal of the school of the nur ying this contract.	
Elementary School			ard of Truste				Date
High School District Drummond H S		Chair, Boa	ard of Truste	es			Date
			I attes	t that the above	information is true and correct.		
Signature - Parent or	Guardian					Date	

Address, City, Zip Code

INDIVIDUAL TRANSPORTATION CONTRACT

Contract #

PO B	ox 202501 na, MT 59620				School Year 2004- 2005 ue to School Clerk June 1		
Elementary District Res	sponsible for Re	eimbursing the	Contract		County		Legal Entity
High School or K-12 Di	strict Responsit	ole for Reimbu	rsing the Cont	tract	County		Legal Entity
Drummond H S					Granite		0420
Is this contract share □ yes □ no	ed between el	ementary an	d high school	ol?			
Are you applying for (If yes, please attacl			□ No		Student Name	School	Grade
rates for special circum increased rates, individurustees of the district,	nstances of isola lual circumstand the county trans	ation of resider ces must be re sportation com	ice. In order to viewed and appointed and the mittee, and the	o receive oproved by the	Student Name	School	Grade
Public Instruction. (10.7) Check here only if incre District Trustees and the	eased payment	due to isolation	n has been ap	pproved by the	Student Name	School	Grade
Elem District Approval	-		tials		Student Name	School	Grade
HS District Approval County Approval	□ yes	□ no □ no			THIS CONTRACT IS FO	OR:	
Parent or Guardian	Name: (Pleas	e Print)			Grades 1-12 ☐ 1st Semester Only	□ 2nd Semester Only	/ □ Both Semesters
Kerry & Dan Gra Physical Address (s		onlv):			Pre-kindergarten/Kinder □ 1st Semester Only		/ □ Both Semesters
,		- ,,			KINDERGARTEN/PRE	·	both Semesters
Distance from home Elementary 0 Distance from home Elementary 0	HS 10.5	·			Kindergarten child rid by this contract: To or from Bus Stop To or from School Kindergarten child rid To or from Bus Stop	times per day,times per day,times per day,times per day,times per day,times per day,times per day,	days per week days per week days per week ol-age students: days per week days per week days per week
□ Contract is for or	, ,					times per day, _	uays per week
Students in Each Grade Le				,	Deadlines: PARENTS: Due to Sch	ool Clerk June 1.	
	Pre-K Total	K Total	1-8 Total	9-12 Total	CLERKS: Send origina files.	I to County Supt by July	1, retain a copy for your
Regular Trans						NDENTS: Send origina	I to OPI by July 10, retain a
Spec. Ed. Trans					copy for your files.		
Room & Board Correspondence						EIMBURSEMENT RA trict, county and OPI	
Reg.					Reimh	ursement rate is determ	nined by
Contingency Spec. Ed. Contin.					remb	20-10-142, MCA.	inica by
		Į.		I			
Agreement between	parent (pare	nt name)			, and school district (dist	rict name)	,,
insured driver will to 2. In March and June, transported for the 3. The payment shall	nsport or provide the studenth the District shall past semester.	nts. Mileage con pay the parent the	the student(s) to tracts are valid of e sum officially a shedule establish	o and from the schoo only when transportat approved in the applic and in Section 20-10-	fter referred to as the District(s) I or bus stop on the days when school is it on for the distance reported on the contration upon certification by the teacher or pure the contration upon certification by the teacher or pure the contration accompanies of the contration acco	n session. The parent or guard ct actually occurs. vincipal of the school of the nur ying this contract.	
Elementary School I			ard of Truste				Date
High School District Drummond H S		Chair, Boa	rd of Truste	es			Date
			I attes	t that the above	information is true and correct.		
Signature - Parent or	Guardian					Date	

Address, City, Zip Code

Linda McCulloch, Superintendent INDIVIDUAL TRANSPORTATION CONTRACT

Contract #

PO Bo	ox 202501 a, MT 59620			_	School Year 2004- 2009 te to School Clerk June	-	
Elementary District Res			Contract		County		Legal Entity
111.1.0.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1.1							15.00
High School or K-12 Dis	strict Responsit	ole for Reimbu	rsing the Cont	ract	County		Legal Entity
Drummond H S				10	Granite		0420
Is this contract share ☐ yes ☐ no		Ţ	Ū	ol?			
Are you applying for (If yes, please attach ISOLATION: Section 2	explanation))	□ No increased reir	mbursement	Student Name	School	Grade
rates for special circums increased rates, individu trustees of the district, the Public Instruction. (10.7	stances of isola ual circumstand ne county trans	ation of resider ces must be re sportation com	nce. In order to viewed and appoint and the mittee, and the	o receive oproved by the	Student Name	School	Grade
Check here only if incre District Trustees and the				proved by the	Student Name	School	Grade
Elem District Approval HS District Approval	•	Ini □ no □ no	tials		Student Name	School	Grade
County Approval	□ yes	□ no			THIS CONTRACT Grades 1-12	'IS FOR:	
Parent or Guardian N	vame: (Pieas	e Print)				only 2nd Semester On	ly Both Semesters
Larry Pralle Physical Address (str	reet address	only):			Pre-kindergarten/k	Kindergarten only □ 2nd Semester Or	lly ☐ Both Semesters
Distance from home Elementary 0 Distance from home Elementary 0 Contract is for on Students in Each Grade Level Regular Trans Spec. Ed. Trans Room & Board Correspondence Reg. Contingency Spec. Ed. Contin.	HS 10 to nearest bu HS 4 e-way only	us stop, if any	y (one way)	9-12 Total	Kindergarten chi by this contract: To or from Bus Sto To or from School Kindergarten chi To or from Bus Sto To or from School Deadlines: PARENTS: Due to CLERKS: Send of files. COUNTY SUPER copy for your files. (Fo	times per day, times per day, times per day, drides without other schop times per day, times per day, times per day, times per day, to School Clerk June 1. briginal to County Supt by Ju	days per week cool-age students: days per week days per week days per week days per week lly 1, retain a copy for your al to OPI by July 10, retain a
insured driver will tra In March and June, transported for the p The payment shall b This contract shall te	s: isport or provide t insport the studei the District shall p ast semester. e computed on the erminate at the er	transportation for nts. Mileage con aay the parent the ne basis of the so nd of the school y	the student(s) to stracts are valid of e sum officially a chedule establish year or when the	o and from the school only when transportation pproved in the applicated in Section 20-10-1 student(s) is no longer	on for the distance reported on the	rict(s). nool is in session. The parent or gual e contract actually occurs. her or principal of the school of the n companying this contract.	umber of days the student(s) was
Elementary School D	vistrict	,	ard of Truste				Date
High School District Drummond H S		Chair, Boa	ard of Truste	es			Date
			I attes	t that the above	information is true and co	rrect.	
Signature - Parent or 0	Guardian					Date	

Address, City, Zip Code

Linda McCulloch, Superintendent INDIVIDUAL TRANSPORTATION CONTRACT

Contract #

Elementary Tasket Responsible for Reinhursing the Contract County Legal Entry	PO Box 202501 Helena, MT 5962			School Year 2004- 2005 Oue to School Clerk June 1		
Britis contract shared between elementary and high school? yes	Elementary District Responsible for F	Reimbursing the Cont	ract	County	<u>'</u>	Legal Entity
Is this contract shared between elementary and high school? yes	High School or K-12 District Respons	sible for Reimbursing	the Contract	County		Legal Entity
Agreement between parent (parent name) Regular Trans Spec. Ed. Trans Regular Trans Regular Trans Spec. Ed. Trans Rom & Board Correspondence Reg. Regular Trans Spec. Ed. Trans Rom & Board Correspondence Reg. Regular Trans Spec. Ed. Trans Courtespondence Reg. Regular Trans Spec. Ed. Contin. Agreement between parent (parent name) County, hereinafter referred to a sthe District, county and OPI use only) County, hereinafter referred to a sthe District, county and OPI use only) Relimbursement rate is determined by the parent referred to a sthe District, county and OPI use only) Regular Trans Spec. Ed. Contin. Agreement between parent (parent name) County, hereinafter referred to a sthe District, county and OPI use only) Regular Trans Rom & Board Correspondence Reg. County name) County name)	Drummond H S			Granite		0420
Siduation Science and stack explanation) Siduation Science and stack application of readed reinforces of reinforces of reinforces of special circumstances of adiation of readed reinforces of special circumstances of reinforces of reinforces of special circumstances of reinforces o		elementary and hig	nh school?			
state for special circumstances of insolation of residence, in order to receive increased rates, individual circumstances must be reviewed and approved by the business of the district, the county transportation cormities, and the Coffice of Papers of the district, the county transportation cormities and the Cormities and the County Transportation Cormities and the	(If yes, please attach explanation	n)		Student Name	School	Grade
Check here only if increased payment due to isolation has been approved by the District Trustees and the County Trustees Includes	rates for special circumstances of isc increased rates, individual circumstal trustees of the district, the county trai	plation of residence. Inces must be reviewed asportation committed	n order to receive ed and approved by the e, and the Office of	Student Name	School	Grade
Substrict Approval yes		nsportation Committe		Student Name	School	Grade
Parent or Guardian Name: (Please Print) Parent or Guardian Name: (Please Print) Both Semesters		□ no	<u> </u>	Student Name	School	Grade
Robert & Sherilee Lund Physical Address (street address only): Pre-kindergarten with fires with other school-age students also covered by this contract.	County Approval yes	□ no		Grades 1-12		
Physical Address (street address only): Stance from home to nearest school (one way) 1 st Semester Only 2 2nd Semester Only 2 and Semester Only 3 and Semester Only 2 and Semester Only 2 and Semester Only 3 and Semester Only 2 and Semester Only 2 and Semester Only 3 and Semester Only	·	ise i fility			•	y Both Semesters
Distance from home to nearest school (one way) Elementary 0		s only):				y
County, hereinafter referred to as the District(s). The parties agree as follows: 1. The parent shall transport or provide transportation for the student(s) to and from the school or bus stop on the days when school is in session. The parent or guardian assures that a licensed and insured driver will transport the students. Mileage contracts are valid only when transportation for the distance reported on the contract actually occurs. 2. In March and June, the District shall pay the parent the sum officially approved in the application upon certification by the teacher or principal of the school of the number of days the student(s) was transported for the past semester. 3. The payment shall be computed on the basis of the schedule established in Section 20-10-142, MCA, and the information accompanying this contract. 4. This contract shall terminate at the end of the school year or when the student(s) is no longer enrolled in school, whichever occurs first. Elementary School District Chair, Board of Trustees Date High School District Chair, Board of Trustees I attest that the above information is true and correct.	Distance from home to nearest to Elementary 0 HS 4 Contract is for one-way only Students in Each Grade Level - Only included Pre-K Total Regular Trans Spec. Ed. Trans Room & Board Correspondence Reg. Contingency	ous stop, if any (on le the students to be cov	ered by this contract.	Kindergarten child ride by this contract: To or from Bus Stop To or from School Kindergarten child ride To or from Bus Stop To or from School Deadlines: PARENTS: Due to Sch CLERKS: Send origina files. COUNTY SUPERINTEN copy for your files. RE (For dist	times per day,times per	days per week days per week ol-age students: days per week y 1, retain a copy for your I to OPI by July 10, retain a
High School District Drummond H S Chair, Board of Trustees Drummond H S I attest that the above information is true and correct.	(county name) The parties agree as follows: 1. The parent shall transport or provide insured driver will transport the stuce. 2. In March and June, the District shall transported for the past semester. 3. The payment shall be computed on 4. This contract shall terminate at the	e transportation for the si lents. Mileage contracts I pay the parent the sum the basis of the schedul end of the school year or	udent(s) to and from the scho are valid only when transporta officially approved in the appli e established in Section 20-10 when the student(s) is no lon	after referred to as the District(s). ool or bus stop on the days when school is in ation for the distance reported on the contralication upon certification by the teacher or po-142, MCA, and the information accompany	session. The parent or guard ct actually occurs. rincipal of the school of the nur	nber of days the student(s) was
I attest that the above information is true and correct.	High School District	,				
	Drummond H S		Lattest that the above	e information is true and correct		
	Signature - Parent or Guardian		Tallest that the above	c information is true and correct.	Date	

Address, City, Zip Code

INDIVIDUAL TRANSPORTATION CONTRACT School Year 2004- 2005

Contract #

PO Box 202501 Helena, MT 5962	0-2501	Г	Due to School Clerk June 1		
Elementary District Responsible for R	teimbursing the Cont	tract	County		Legal Entity
Drummond Elem			Granite		0419
High School or K-12 District Respons	ible for Reimbursing	the Contract	County		Legal Entity
Is this contract shared between e	elementary and hig	gh school?			
Are you applying for isolation sta		No	Student Name	School	Grade
(If yes, please attach explanation ISOLATION: Section 20-10-142, MC		ased reimbursement		CCHOOL	Grade
rates for special circumstances of iso increased rates, individual circumstar trustees of the district, the county trar	lation of residence. Inces must be reviewed asportation committed.	In order to receive ed and approved by the e, and the Office of	Student Name	School	Grade
Public Instruction. (10.7.116 ARM pro	t due to isolation has	s been approved by the	Student Name	School	Grade
District Trustees and the County Tran	sportation Committe Initials	ee.	Student Name	School	Grade
Elem District Approval □ yes HS District Approval □ yes	□ no	<u> </u>			Grade
County Approval	no Drint)		THIS CONTRACT IS FO Grades 1-12	<u>DR:</u>	
Parent or Guardian Name: (Pleas	se Print)		☐ 1st Semester Only	 2nd Semester Only 	□ Both Semesters
Denise Hultman Physical Address (street address	only):		Pre-kindergarten/Kinder		
Filysical Address (sileet address	s orliy).		☐ 1st Semester Only	☐ 2nd Semester Only	✓ □ Both Semesters
Distance from home to nearest s Elementary 4 HS 0	chool (one way)		by this contract: To or from Bus Stop	es <u>with</u> other school-a times per day,	ge students also covered days per week
Distance from home to nearest be Elementary 4 HS 0	us stop, if any (on	ne way)	To or from School Kindergarten child ride To or from Bus Stop To or from School	times per day, _ es <u>without</u> other schoo times per day, _ times per day	days per week pl-age students: days per week days per week days per week
□ Contract is for one-way only				times per day, _	days per week
Students in Each Grade Level - Only include	e the students to be cov	ered by this contract.	Deadlines: PARENTS: Due to Sch	ool Clerk June 1.	
Pre-K Total		1-8 9-12 otal Total			1, retain a copy for your
Regular Trans				IDENITO 0 1	0011 11 10 11
Spec. Ed. Trans			copy for your files.	IDENIS: Send original	to OPI by July 10, retain a
Room & Board				EIMBURSEMENT RA	
Correspondence			(For dist	rict, county and OPI	use only)
Reg.			Reimbi	ursement rate is determ	ined by
Contingency Spec. Ed. Contin.			Reimbi	20-10-142, MCA.	inica by
Opco. Eu. Contin.					
Agreement between parent (pare	ent name)		, and school district (district)	rict name)	,
(county name) The parties agree as follows:		County, herein	nafter referred to as the District(s).		
 The parent shall transport or provide 			ool or bus stop on the days when school is in tation for the distance reported on the contract		an assures that a licensed and
In March and June, the District shall transported for the past semester.	pay the parent the sum	officially approved in the app	lication upon certification by the teacher or p	rincipal of the school of the nun	nber of days the student(s) was
 This contract shall terminate at the example. 	end of the school year or	r when the student(s) is no lor	0-142, MCA, and the information accompany nger enrolled in school, whichever occurs firs		1
Elementary School District Drummond Elem	Chair, Board o	t Trustees			Date
High School District	Chair, Board o	f Trustees			Date
		I attest that the abov	re information is true and correct.		1
Signature - Parent or Guardian				Date	

Address, City, Zip Code

INDIVIDUAL TRANSPORTATION CONTRACT School Year 2004- 2005

Contract #

	ox 202501 na, MT 59620	-2501		Di	ue to School (Clerk June 1			
Elementary District Res	sponsible for Re	eimbursing the	Contract		Co	ounty		Legal Entity	
Drummond Elen	n				G	ranite		0419	
High School or K-12 Di	strict Responsit	ole for Reimbu	rsing the Conf	tract	Co	ounty		Legal Entity	
Is this contract share ☐ yes ☐ no	ed between el	ementary ar	nd high scho	ol?					
Are you applying for			□ No		Student	Name	School		Grade
(If yes, please attach	20-10-142, MCA	A, provides for							
rates for special circum increased rates, individ trustees of the district,	ual circumstand	es must be re	viewed and a	oproved by the	Student	Name	School		Grade
Public Instruction. (10.7				c office of	Student	Name	School		Grade
Check here only if incre District Trustees and th				proved by the	Studeni	i Name	301001		Grade
Elem District Approval	□ yes	In □ no	itials		Student	Name	School		Grade
HS District Approval County Approval		□ no □ no				ONTRACT IS FO	DR:		
Parent or Guardian	Name: (Pleas	e Print)			Grades □ 1st S	1-12 Semester Only	☐ 2nd Semester Only	y 🗆 Both Se	mesters
Glenna Bryant					Pre-kin	dergarten/Kinder	narten		
Physical Address (st	treet address	only):					☐ 2nd Semester Only	y 🛛 Both Se	mesters
							KINDERGARTEN:		
Distance from home		hool (one wa	ay)		by this	contract:	es <u>with</u> other school-a	_	
Elementary 32	HS 0				To or fro	om Bus Stop om School	times per day, _	day:	s per week s per week
Distance from home Elementary 7	to nearest bu	ıs stop, if an	y (one way)		Kinder To or fr	garten child ride om Bus Stop	times per day, _es <u>without</u> other schoot times per day, _ times per day, _	ol-age studen day	ts: s per week
□ Contract is for or	ne-way only				To or fr	om School	times per day, _	day	s per week
Students in Each Grade Le	evel - Only include	the students to I	be covered by th	is contract.	Deadl		ool Clerk June 1.		
	Pre-K Total	K Total	1-8 Total	9-12 Total	CLERK		I to County Supt by July	y 1, retain a co	py for your
Regular Trans					files.				
Spec. Ed. Trans						TY SUPERINTEN r your files.	IDENTS: Send origina	ıl to OPI by Jul	/ 10, retain a
Room & Board						RE	IMBURSEMENT RA	ATE	
Correspondence						(For dist	rict, county and OPI	use only)	
Reg.								<u> </u>	
Contingency						Reimb	ursement rate is detern 20-10-142, MCA.	nined by	
Spec. Ed. Contin.									
Agreement between	parent (parer	nt name)			, and so	hool district (dist	rict name)		,
(county name) The parties agree as follow	/S:			County, hereina	fter referred to	as the District(s).			
The parent shall tra insured driver will tr	nsport or provide tansport the studer	nts. Mileage cor	ntracts are valid of	only when transportat	ion for the distance	reported on the contra	session. The parent or guard ct actually occurs.		
transported for the	past semester.					on by the teacher or p	rincipal of the school of the nur	mber of days the stu	dent(s) was
	terminate at the er	d of the school		student(s) is no long		, whichever occurs firs		Date	
Drummond Elem	J.00100	,							
High School District		Chair, Boa	ard of Truste	es				Date	
			l attes	t that the above	information is t	rue and correct.			
Signature - Parent or	Guardian						Date		

Address, City, Zip Code

INDIVIDUAL TRANSPORTATION CONTRACT School Year 2004- 2005

Contract #

	3ox 202501 na, MT 59620	-2501				ol Clerk June 1		
Elementary District Re	sponsible for Re	imbursing the C	Contract			County	<u> </u>	Legal Entity
Drummond Eler	n					Granite		0419
High School or K-12 D		le for Reimburs	sing the Cont	ract		County		Legal Entity
Is this contract shar ☐ yes ☐ no	ed between el	ementary and	l high scho	ol?				
Are you applying for (If yes, please attac	h explanation)		□ No		Stud	dent Name	School	Grade
ISOLATION: Section rates for special circun increased rates, individe trustees of the district, Public Instruction. (10.	nstances of isola dual circumstance the county trans	tion of residences must be revi portation comm	e. In order to iewed and applittee, and the	o receive oproved by the	Stud	dent Name	School	Grade
Check here only if incr	Check here only if increased payment due to isolation has been approved by the District Trustees and the County Transportation Committee.					dent Name	School	Grade
Elem District Approval yes no					Stud	dent Name	School	Grade
County Approval	□ yes	no				S CONTRACT IS FO	DR:	
Parent or Guardian	Name: (Pleas	e Print)				st Semester Only	□ 2nd Semester On	ly Both Semesters
Gordon Paske		I. A.			Pre-	-kindergarten/Kinder	garten	
Physical Address (s	treet address	oniy):			□ 1	st Semester Only	2nd Semester On	ly Both Semesters
Distance from home Elementary 14 Distance from home Elementary 9.2 Contract is for o Students in Each Grade Low Regular Trans Spec. Ed. Trans Room & Board Correspondence Reg. Contingency Spec. Ed. Contin.	HS 0 e to nearest bu HS 0 ne-way only	s stop, if any	(one way)	s contract. 9-12 Total	Kind by the Took Kind Took Took Took PAR	his contract: or from Bus Stop_ or from School dergarten child ride or from Bus Stop_ or from School adlines: RENTS: Due to Schoel ERKS: Send original . UNTY SUPERINTEN y for your files. REA REA REA REA REA REA REA RE	times per day,	days per week days per week days per week ly 1, retain a copy for your al to OPI by July 10, retain a ATE I use only)
insured driver will t 2. In March and June transported for the 3. The payment shall	vs: nansport or provide t ransport the studer, the District shall p past semester. be computed on the terminate at the en District	ransportation for t tts. Mileage contr ay the parent the e basis of the sch	he student(s) to acts are valid of sum officially a edule establish ar or when the rd of Truste	o and from the school only when transportation pproved in the applicated in Section 20-10-1 student(s) is no longer	or bus stop on on for the dista ation upon certi	nce reported on the contract	session. The parent or guar tt actually occurs. rincipal of the school of the nu	dian assures that a licensed and umber of days the student(s) was Date Date
			I attes	t that the above i	information	is true and correct.		
Signature - Parent or	Guardian				·		Date	

Address, City, Zip Code

INDIVIDUAL TRANSPORTATION CONTRACT School Year 2004- 2005

Contract #

	30x 202501 na, MT 59620)-2501	Due to School Clerk June 1						
Elementary District Re	sponsible for Re	eimbursing the C	Contract			County	<u> </u>	Legal Entity	
Drummond Eler						Granite		0419	
High School or K-12 D	istrict Responsit	ole for Reimburs	sing the Cont	ract		County		Legal Entity	
Is this contract shar ☐ yes ☐ no	ed between el	ementary and	l high scho	ol?					
Are you applying for (If yes, please attac			□ No		Stud	lent Name	School	Grade	
ISOLATION: Section rates for special circum	20-10-142, MCA	A, provides for in							
increased rates, individed trustees of the district, Public Instruction. (10.)	dual circumstand the county trans	ces must be revi sportation comm	iewed and ap nittee, and th	proved by the	Stud	lent Name	School	Grade	
Check here only if incr District Trustees and the	eased payment	due to isolation	has been ap	proved by the	Stud	lent Name	School	Grade	
Elem District Approval		Initi □ no			Stuc	lent Name	School	Grade	
HS District Approval County Approval		□ no □ no				S CONTRACT IS FO	DR:		
Parent or Guardian	Name: (Pleas	e Print)				des 1-12 st Semester Only	□ 2nd Semester On	ly Both Semesters	
Machion Reisne					Pre-	kindergarten/Kinder	garten		
Physical Address (s	treet address	only):			□ 1	st Semester Only	☐ 2nd Semester On	ly Doth Semesters	
Distance from home Elementary 12 Distance from home Elementary 7 Contract is for o Students in Each Grade Lower Students in Each Grade Lower Spec. Ed. Trans Room & Board Correspondence Reg. Contingency Spec. Ed. Contin.	HS 0 e to nearest bu HS 0 ne-way only	the students to be	(one way) covered by the 1-8 Total	9-12 Total	KINI Kind by t To c Kind To c To c PAR CLE files COU	DERGARTEN/PREI Dergarten child ride his contract: or from Bus Stop or from Bus Stop or from School dergarten child ride or from School adlines: Due to Sch or RKS: Send origina or for your files. REGION OF THE PREINTEN OF	times per day, times	days per week	
Agreement between parent (parent name)									
			l attes	t that the above i	information	is true and correct.		1	
Signature - Parent or	Guardian						Date		

Address, City, Zip Code

INDIVIDUAL TRANSPORTATION CONTRACT School Year 2004- 2005

Contract #

	3ox 202501 na, MT 59620	-2501	Due to School Clerk June 1						
Elementary District Re	sponsible for Re	imbursing the C	Contract			County	<u> </u>	Legal Entity	
Drummond Eler	n					Granite		0419	
High School or K-12 D		le for Reimburs	sing the Cont	ract		County		Legal Entity	
Is this contract shar ☐ yes ☐ no	ed between el	ementary and	l high scho	ol?					
Are you applying for (If yes, please attac	h explanation)		□ No		Stud	dent Name	School	Grade	
ISOLATION: Section rates for special circun increased rates, individe trustees of the district, Public Instruction. (10.	nstances of isola dual circumstance the county trans	tion of residences must be revi sportation comm	e. In order to iewed and applittee, and the	o receive oproved by the	Stud	dent Name	School	Grade	
Check here only if incr District Trustees and the	eased payment	due to isolation	has been ap	proved by the	Stud	dent Name	School	Grade	
Elem District Approval HS District Approval	□ yes	Initia □ no □ no	als		Stud	dent Name	School	Grade	
County Approval	□ yes	□ no			THIS CONTRACT IS FOR: Grades 1-12				
Parent or Guardian	Name: (Pleas	e Print)				st Semester Only	□ 2nd Semester On	ly Both Semesters	
Mario Antonio		I. A.				-kindergarten/Kinder			
Physical Address (s	treet address	oniy):			□ 1	st Semester Only	□ 2nd Semester On	ly Doth Semesters	
Distance from home Elementary 6.5 Distance from home Elementary 0 Contract is for o Students in Each Grade Lease From Each Grade From Each	HS 0 e to nearest bu HS 0 ne-way only	s stop, if any	(one way)	s contract. 9-12 Total	Kine by t To c Kine To c V To c PAR CLE files	his contract: or from Bus Stop_ or from School dergarten child ride or from Bus Stop_ or from School adlines: RENTS: Due to Schoel ERKS: Send original . UNTY SUPERINTEN y for your files. REA REA REA REA REA REA REA RE	times per day, tool Clerk June 1.	days per week days per week days per week ly 1, retain a copy for your al to OPI by July 10, retain a late late late and late late late late late late late late	
Agreement between parent (parent name)									
			I attes	t that the above i	information	is true and correct.			
Signature - Parent or	Guardian						Date		

Address, City, Zip Code

INDIVIDUAL TRANSPORTATION CONTRACT School Year 2004- 2005

Contract #

	3ox 202501 na, MT 59620	-2501	Due to School Clerk June 1						
Elementary District Re	sponsible for Re	imbursing the C	Contract			County	<u> </u>	Legal Entity	
Drummond Eler	em					Granite		0419	
High School or K-12 D		le for Reimburs	sing the Cont	ract		County		Legal Entity	
Is this contract shar ☐ yes ☐ no	ed between el	ementary and	l high schoo	ol?					
Are you applying for (If yes, please attac	h explanation)		□ No		Stud	dent Name	School	Grade	
ISOLATION: Section rates for special circun increased rates, individe trustees of the district, Public Instruction. (10.	nstances of isola dual circumstance the county trans	tion of residences must be revi sportation comm	e. In order to lewed and ap nittee, and the	o receive oproved by the	Stud	dent Name	School	Grade	
Check here only if incr District Trustees and the	eased payment	due to isolation	has been ap	proved by the	Stud	dent Name	School	Grade	
Elem District Approval HS District Approval	□ yes	Initi □ no □ no	als		Stud	dent Name	School	Grade	
County Approval	□ yes	□ no			THIS CONTRACT IS FOR: Grades 1-12				
Parent or Guardian	Name: (Pleas	e Print)				st Semester Only	□ 2nd Semester On	ly Both Semesters	
Michelle Page		L- A-				-kindergarten/Kinder			
Physical Address (s	treet address	oniy):			□ 1	st Semester Only	2nd Semester On	ly Doth Semesters	
Distance from home Elementary 34 Distance from home Elementary 8 Contract is for o Students in Each Grade Lease From Each Grade Education Each Grade Lease From Each Grade Education Each Grade Education Each Grade Education Each Grade Education Ed	HS 0 e to nearest bu HS 0 ne-way only	s stop, if any	(one way)	s contract. 9-12 Total	Kind by the Took Kind Took Took Took PAR	his contract: or from Bus Stop or from School dergarten child ride or from Bus Stop or from School adlines: RENTS: Due to Scho ERKS: Send original . UNTY SUPERINTEN y for your files. REA REA REA REA REA REA REA RE	times per day,	days per week days per week ly 1, retain a copy for your al to OPI by July 10, retain a ATE I use only)	
Agreement between parent (parent name)									
			I attes	t that the above i	information	is true and correct.			
Signature - Parent or	Guardian						Date		

Address, City, Zip Code

INDIVIDUAL TRANSPORTATION CONTRACT School Year 2004- 2005

Contract #

Helena, MT 59620-2501 Due to School Clerk June 1										
Elementary District Res	sponsible for Re	imbursing the	Contract		C	ounty		Legal Entity		
Drummond Elen	n				G	Granite		0419		
High School or K-12 Di	strict Responsit	ole for Reimbu	rsing the Conf	tract	C	ounty		Legal Entity		
Is this contract share ☐ yes ☐ no	ed between el	ementary ar	nd high scho	ol?						
Are you applying for (If yes, please attach			□ No		Student	t Name	School		Grade	
ISOLATION: Section 2	20-10-142, MCA	, provides for								
rates for special circum increased rates, individ	lual circumstand	es must be re	viewed and a	oproved by the	Student	t Name	School		Grade	
trustees of the district, Public Instruction. (10.7)				e Office of	Churdon	4 Nama	Cohool		Orada	
Check here only if incre District Trustees and th				proved by the	Studen	i ivairie	School		Grade	
Elem District Approval	·		itials		Studen	t Name	School		Grade	
HS District Approval County Approval		no no			THIS C	ONTRACT IS FO	DR:			
Parent or Guardian		e Print)			Grades	1-12 Semester Only	□ 2nd Semester Only	v □ Both Se	mesters	
Shelley Shatto						dergarten/Kinder	•	, = 2000		
Physical Address (st	treet address	only):					□ 2nd Semester Only	y 🛘 Both Se	mesters	
							KINDERGARTEN:			
Distance from home		hool (one wa	ay)		by this	contract:	es <u>with</u> other school-a	_		
Elementary 32.5	HS 0				To or fr	om Bus Stop	times per day, _	day	s per week s per week	
Distance from home Elementary 7.5	to nearest bu HS 0	is stop, if an	y (one way)		Kinder To or fr	To or from School times per day, days per week Kindergarten child rides without other school-age students: To or from Bus Stop times per day, days per week To or from School times per day, days per week				
□ Contract is for or	ne-way only				To or fr	om School	times per day, _	day	s per week	
Students in Each Grade Le	evel - Only include	the students to I	be covered by th	is contract.	<u>Deadl</u>	lines: NTS: Due to Sch	ool Clark June 1			
	Pre-K Total	K Total	1-8 Total	9-12 Total	CLERK		to County Supt by July	y 1, retain a co	py for your	
Regular Trans					files.					
Spec. Ed. Trans						FY SUPERINTEN r your files.	IDENTS: Send origina	ll to OPI by July	/ 10, retain a	
Room & Board							EIMBURSEMENT RA			
Correspondence						(For dist	rict, county and OPI	use only)		
Reg.						_				
Contingency						Reimbi	ursement rate is determ 20-10-142, MCA.	nined by		
Spec. Ed. Contin.										
Agreement between	parent (parei	nt name)			, and so	chool district (dist	rict name)		,	
(county name) The parties agree as follow	/s:			County, hereinat	fter referred to	as the District(s).				
insured driver will tr	ransport the studer	nts. Mileage cor	ntracts are valid of	only when transportati	ion for the distance	reported on the contract	session. The parent or guard actually occurs.			
transported for the	past semester.					ion by the teacher or particles information accompany	rincipal of the school of the nur	niver or days the stu	uent(s) was	
	terminate at the er	d of the school		student(s) is no longe		I, whichever occurs firs		Date		
Drummond Elem		,								
High School District		Chair, Boa	ard of Truste	८ ऽ				Date		
			l attes	t that the above	information is t	true and correct.				
Signature - Parent or	Guardian						Date			

Address, City, Zip Code

INDIVIDUAL TRANSPORTATION CONTRACT

Contract #

	x 202501 a, MT 59620)-2501			chool Year 2004- 2005 e to School Clerk June 1				
Elementary District Res	oonsible for Re	eimbursing the	Contract		County	<u>'</u>	Legal Entity		
Drummond Elem					Granite		0419		
High School or K-12 Dis	trict Responsit	ole for Reimbur	sing the Con	ract	County		Legal Entity		
Drummond H S					Granite		0420		
Is this contract share □ yes □ no	d between el	ementary and	d high scho	ol?					
Are you applying for i	explanation))	□ No		Student Name	School	Grade		
rates for special circums increased rates, individu trustees of the district, the Public Instruction. (10.7.	stances of isola al circumstand ne county trans	ation of residen ces must be rev sportation com	ce. In order t viewed and ap mittee, and th	o receive oproved by the	Student Name	School	Grade		
Check here only if increa	ased payment	due to isolatior	n has been ap	proved by the	Student Name	School	Grade		
Elem District Approval	□ yes	Init □ no	ials		Student Name	School	Grade		
HS District Approval County Approval		□ no □ no			THIS CONTRACT IS FOR:				
Parent or Guardian N	lame: (Pleas	e Print)			Grades 1-12 ☐ 1st Semester Only	□ 2nd Semester Only	/ □ Both Semesters		
Annette Steele					Pre-kindergarten/Kinder	garten			
Physical Address (str	eet address	only):			☐ 1st Semester Only ☐ 2nd Semester Only ☐ Both Semesters				
Distance from home Elementary 0 Distance from home Elementary 0 Contract is for one Students in Each Grade Leventary 1 Regular Trans Spec. Ed. Trans Room & Board Correspondence Reg. Contingency Spec. Ed. Contin.	HS 0 to nearest bu HS 4.3 e-way only	us stop, if any	(one way)	is contract. 9-12 Total	by this contract: To or from Bus Stop To or from School Kindergarten child ride To or from Bus Stop To or from School Deadlines: PARENTS: Due to Sch CLERKS: Send original files. COUNTY SUPERINTER copy for your files. RE (For dist	times per day, times	days per week days per week days per week 7 1, retain a copy for your I to OPI by July 10, retain a ATE use only)		
Agreement between parent (parent name)									
Elementary School D Drummond Elem			rd of Truste		,		Date		
High School District Drummond H S		Chair, Boa	rd of Truste	es			Date		
			I attes	t that the above i	nformation is true and correct.				
Signature - Parent or C	Guardian					Date			

Address, City, Zip Code

INDIVIDUAL TRANSPORTATION CONTRACT

Contract #

	x 202501 a, MT 59620)-2501			chool Year 2004- 2005 e to School Clerk June 1				
Elementary District Res	oonsible for Re	eimbursing the	Contract		County	<u>'</u>	Legal Entity		
Drummond Elem					Granite		0419		
High School or K-12 Dis	trict Responsit	ole for Reimbur	sing the Con	ract	County		Legal Entity		
Drummond H S					Granite		0420		
Is this contract share ☐ yes ☐ no	d between el	ementary and	d high scho	ol?					
Are you applying for (If yes, please attach ISOLATION: Section 2	explanation))	□ No	mburo om ont	Student Name	School	Grade		
rates for special circums increased rates, individu trustees of the district, the Public Instruction. (10.7.	stances of isola al circumstand ne county trans	ation of residen ces must be rev sportation com	ce. In order t viewed and ap mittee, and th	o receive oproved by the	Student Name	School	Grade		
Check here only if increa				proved by the	Student Name	School	Grade		
		□ no	ials 		Student Name	School	Grade		
HS District Approval County Approval	,	□ no □ no			THIS CONTRACT IS FOR:				
Parent or Guardian N	lame: (Pleas	e Print)			Grades 1-12 ☐ 1st Semester Only	□ 2nd Semester Only	/ □ Both Semesters		
Danielle & Jon B					Pre-kindergarten/Kindergarten				
Physical Address (str	eet address	only):			☐ 1st Semester Only ☐ 2nd Semester Only ☐ Both Semesters				
Distance from home Elementary 0 Distance from home Elementary 0 Contract is for on Students in Each Grade Leventary 1 Regular Trans Spec. Ed. Trans Room & Board Correspondence Reg. Contingency Spec. Ed. Contin.	HS 6 to nearest bu HS 6 e-way only	us stop, if any	(one way)	9-12 Total	by this contract: To or from Bus Stop To or from School Kindergarten child ride To or from Bus Stop To or from School Deadlines: PARENTS: Due to Sch CLERKS: Send origina files. COUNTY SUPERINTER copy for your files. RI (For dis	times per day, times	days per week days per week days per week 7 1, retain a copy for your I to OPI by July 10, retain a ATE use only)		
Agreement between parent (parent name)									
Elementary School D Drummond Elem			rd of Truste				Date		
High School District Drummond H S		Chair, Boa	rd of Truste	es			Date		
3.4		1	I attes	t that the above i	nformation is true and correct.				
Signature - Parent or C	Guardian					Date			

Address, City, Zip Code

INDIVIDUAL TRANSPORTATION CONTRACT

Contract #

	ox 202501 na, MT 59620	-2501			chool Year 2004- 2005 e to School Clerk June 1				
Elementary District Res	sponsible for Re	imbursing the (Contract		County		Legal Entity		
Drummond Elen	1				Granite		0419		
High School or K-12 Di		le for Reimburs	sing the Con	tract	County		Legal Entity		
Drummond H S					Granite		0420		
Is this contract share ☐ yes ☐ no	ed between el	ementary and	l high scho	ol?					
Are you applying for (If yes, please attach	n explanation)		□ No		Student Name	School	Grade		
rates for special circum increased rates, individ trustees of the district, Public Instruction. (10.7)	stances of isola ual circumstand the county trans	tion of residences must be reversely common time.	ce. In order to iewed and applittee, and the	o receive oproved by the	Student Name	School	Grade		
Check here only if incre District Trustees and th	eased payment	due to isolation	has been ap	pproved by the	Student Name	School	Grade		
Elem District Approval	□ yes	Initi □ no	als		Student Name	School	Grade		
HS District Approval County Approval		□ no □ no			THIS CONTRACT IS FOR:				
Parent or Guardian	Name: (Pleas	e Print)			Grades 1-12 ☐ 1st Semester Only	□ 2nd Semester Onl	y Both Semesters		
Norm Van Beek					Pre-kindergarten/Kindergarten				
Physical Address (st	reet address	only):			☐ 1st Semester Only ☐ 2nd Semester Only ☐ Both Semesters				
Distance from home Elementary 0 Distance from home Elementary 0	HS 32 to nearest bu HS 7				by this contract: To or from Bus Stop To or from School Kindergarten child ride	es <u>with</u> other school-a times per day, times per day, es <u>without</u> other scho	days per week days per week days per week ol-age students: days per week days per week days per week days per week		
☐ Contract is for or	, ,	4h4d4 - 4 - 1							
Students in Each Grade Le					Deadlines: PARENTS: Due to Sch	ool Clerk June 1.			
	Pre-K Total	K Total	1-8 Total	9-12 Total	CLERKS: Send origina files.	to County Supt by Jul	y 1, retain a copy for your		
Regular Trans						IDENTS: Send origina	al to OPI by July 10, retain a		
Spec. Ed. Trans					copy for your files.				
Room & Board					RE	EIMBURSEMENT RA			
Correspondence									
Reg. Contingency					Reimb	ursement rate is deterr	nined by		
Spec. Ed. Contin.						20-10-142, MCA.			
		I							
Agreement between	parent (parei	nt name)			, and school district (dist	rict name)	,		
(county name)	. "	,			er referred to as the District(s).	,			
The parties agree as follow		ransportation for t		•	or bus stop on the days when school is in		lian assures that a licensed and		
insured driver will tr	ansport the studer	nts. Mileage contr	acts are valid	only when transportation	on for the distance reported on the contraction upon certification by the teacher or p	ct actually occurs.			
transported for the payment shall	past semester. be computed on th	e basis of the sch	edule establisi	ned in Section 20-10-1	42, MCA, and the information accompany	ring this contract.	, , ,		
4. This contract shall t Elementary School I	erminate at the er	chair, Boar	ar or when the	student(s) is no longe	r enrolled in school, whichever occurs firs	it.	Date		
Drummond Elem		,							
High School District Drummond H S		Chair, Boar	u oi iruste				Date		
			I attes	t that the above i	nformation is true and correct.				
Signature - Parent or	Guardian					Date			

Address, City, Zip Code

INDIVIDUAL TRANSPORTATION CONTRACT

Contract #

PO Box 202501 Helena, MT 59620	-2501	School Year 2004- 2005 Due to School Clerk June 1							
Elementary District Responsible for Re	imbursing the Contract		County		Legal Entity				
Drummond Elem	ū		Granite		0419				
High School or K-12 District Responsib	ole for Reimbursing the Co	ntract	County		Legal Entity				
Drummond H S			Granite		0420				
Is this contract shared between ele □ yes □ no	ementary and high sch	ool?							
Are you applying for isolation statu	us? □ Yes □ No		Student Name	Sahaal	Crado				
(If yes, please attach explanation) ISOLATION: Section 20-10-142, MCA	a. provides for increased re	eimbursement	Student Name	School	Grade				
rates for special circumstances of isola increased rates, individual circumstanc trustees of the district, the county trans Public Instruction. (10.7.116 ARM provi	tion of residence. In order res must be reviewed and a portation committee, and t	to receive approved by the	Student Name	School	Grade				
Check here only if increased payment of District Trustees and the County Trans	due to isolation has been a	approved by the	Student Name	School	Grade				
	Initials □ no		Student Name	School	Grade				
	□ no □ no		THIS CONTRACT IS FO	DR:					
Parent or Guardian Name: (Please	e Print)		Grades 1-12 ☐ 1st Semester Only	☐ 2nd Semester Onl	y Both Semesters				
Vincent & Sara Hult Physical Address (street address of	oulv).		Pre-kindergarten/Kinder	garten	•				
1 Trystodi 7 tadress (street address t	orny).		□ 1st Semester Only □ 2nd Semester Only □ Both Semesters KINDERGARTEN/PREKINDERGARTEN :						
Distance from home to nearest solution Elementary 0 HS 19 Distance from home to nearest but Elementary 0 HS 8 Contract is for one-way only)	by this contract: To or from Bus Stop To or from School Kindergarten child ride	times per day, _ times per day, _ s without other scho	days per week days per week days per week ol-age students: days per week days per week days per week				
Students in Each Grade Level - Only include	the students to be covered by t	this contract.	Deadlines:	101 1 1					
Pre-K Total	K 1-8 Total Total	9-12 Total			y 1, retain a copy for your				
Regular Trans			files.						
Spec. Ed. Trans			county superintent copy for your files.	IDENTS: Send origina	al to OPI by July 10, retain a				
Room & Board				IMBURSEMENT RA					
Correspondence			(i oi dist	nici, county and Or i	use offiy)				
Reg. Contingency			Reimbi	ursement rate is deterr	nined by				
Spec. Ed. Contin.				20-10-142, MCA.					
	1								
Agreement between parent (parer	nt name)		, and school district (distr	rict name)	,				
(county name)		County, hereinaft	ter referred to as the District(s).						
			or bus stop on the days when school is in		lian assures that a licensed and				
In March and June, the District shall program transported for the past semester.	nts. Mileage contracts are valid ay the parent the sum officially	approved in the application	on for the distance reported on the contraction upon certification by the teacher or p	ct actually occurs. rincipal of the school of the nu	mber of days the student(s) was				
The payment shall be computed on th			42, MCA, and the information accompany r enrolled in school, whichever occurs firs						
Elementary School District Drummond Elem	Chair, Board of Trust				Date				
High School District Drummond H S	Chair, Board of Trust	rees			Date				
	l atte	st that the above i	nformation is true and correct.						
Signature - Parent or Guardian				Date					